FORM D

a part of this notice and must be completed.

OMB control number.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005

Estimated average burden hours per response..1

SEC USE ONLY

Prefix Serial

DATE RECEIVED

UP TO 100 CLASS A AND CLASS B UNITS OF LIMITED PARTNERSHIP INTEREST	C ,
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506	
Type of Filing: [] New Filing [X] Amendment	
A. BASIC IDENTIFICATION DA	ATA
1. Enter the information requested about the issuer	
Name of Issuer ([] check if this is an amendment and name has changed, and indic	ate change.)
RAINIER INCOME & GROWTH FUND II, LTD.	06060287
Address of Executive Offices (Number and Street, City, State, Zip Code) 13760 Noel Road, Suite 800, Dallas, Texas 75240	Telephone Number (Including Area Code) 214-234-8200
Address of Principal (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Investment in entities owning real estate interests.	
Type of Business Organization	
	r (please specify):
business trust I limited partnership, to be formed	
Month Year	[X] Actual [] Estimated
Actual or Estimated Date of Incorporation or Organization: [0]5 [05]	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service	abbreviation for State; CN for Canada; FN for
other foreign jurisdiction) [T][X]	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4	(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is decerable of the date it is received by the SEC at the address given below or, if received at that address after the date on which mail to that address.	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any clear typed or printed signatures.	opies not manually signed must be photocopies of manually signed copy or
Information Required: A new filing must contain all information requested. Amendments need only report the name of th C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need no	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in t	hose states that have adopted ULOE and that have adopted this form. Issuers

relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes

ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid

				A. BASIC IE	ENTIF	ICATION DATA		···········		
2. Enter the information reques	ted for th	e following:								
Each promoter of the second control of	ne issuer,	if the issuer	has be	een organized within	the past	five years;				
Each beneficial ow	ner havins	the power t	o vole	e or dispose, or direct	the vot	e or disposition of, 10)% or n	nore of a cla	ass of	equity securities of the issuer;
						neral and managing p				
			•		nate ge	nerai anu managing p	armers	or partiters	inth 13	sucis, and
• Each general and m			tners					<u> </u>		
Check Box(es) that Apply:		Promoter	[]	Beneficial Owner	1 }	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if	maividua	1)								
Business or Residence Address	(Numbe	r and Street,	City,	State, Zip Code)						
Check Box(es) that Apply:	IJ	Promoter	11	Beneficial Owner	[]	Executive Officer	[]	Director	11	General and/or Managing Partner
Full Name (Last name first, if	individua	1)								
Business or Residence Addres	s (Numbe	er and Street,	City,	State, Zip Code)						
Check Box(es) that Apply:	[]	Promoter	[]	Beneficial Owner	[]	Executive Officer	ΙΙ	Director	[]	General and/or Managing Partner
Full Name (Last name first, if	individua	1)								
Business or Residence Addres	s (Numbe	er and Street,	City,	State, Zip Code)						<u> </u>
Check Box(es) that Apply:	[]	Promoter	[]	Beneficial Owner	()	Executive Officer	11	Director	[]	General and/or Managing Partner
Full Name (Last name first, if	individua	I)								
Business or Residence Addres	s (Numbe	er and Street.	City,	State, Zip Code)						
Check Box(es) that Apply:	[]	Promoter	IJ	Beneficial Owner	[]	Executive Officer	[]	Director	1 1	General and/or Managing Partner
Full Name (Last name first, if	individua	l)								
Business or Residence Addres	s (Numbe	er and Street,	City,	State, Zip Code)			<u> </u>			
Check Box(es) that Apply:	[]	Promoter	[]	Beneficial Owner	[]	Executive Officer	l J	Director	[.	General and/or

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. INFO	ORMATIO	N ABOUT (OFFERING	G			
1. Has th	e issuer sold	l, or does the	issuer inten	d to sell, to	non-accredite					, , , , , ,	Yes[X] No[]
				Answer	also in Apper	ndix, Colum	n 2, if filing	under ULO	E.			
2. What	is the minim	um investme	ent that will	be accepted	from any ind	lividual?					\$ <u>20,00</u>	00
3. Does t	he offering	permit joint (ownership o	fa single ur	nit?						Yes	No []
purchaser: and/or wit	s in connect:	ion with sale	s of securities e name of th	es in the off e broker or	ering. If a per	son to be lis	sted is an ass	ociated pers	son or agent o	of a broker of	milar remu r dealer regi	neration for solicitation of stered with the SEC er or dealer, you may set
	e (Last name e nt, J.R.	first, if indi	vidual)							•		
				•	State, Zip Co Lake City		17					
OMNI I	Brokerag			Intends to	Solicit Purcha	asers						
(Check "	All States" c	or check indi	vidual States	i)			[] All Sta	tes				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	(NC)	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(נעזן)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	: (Last name , David E	e first, if indi	vidual)									
				-	State, Zip Co 1, GA 3032							
Sanders	Morris I	Broker or Dea	c.	1-1 1-1-	Caliais DL							
					Solicit Purcha		l All States					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
JIL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	(IVAI)	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name		: first, if indi		(124)	(01)	[**]	(IVA)	[WA]	(***)	(***)	1 ** * 1	[FK]
					State, Zip Co							
Sanders	Morris I	Broker or Dea	c.	Intends to	Solicit Purcha	seare						
] All States					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[H1]	(ID)
[11.]	[IN]	[14]	[KS]	[KY]	(JLAI)	[ME]	[MD]	[MA]	[MI]	IMNI	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	(INM)	[NY]	[NC]	[ND]	[он]	[OK]	[OR]	[PA]
									[WV]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[VY V]	[WI]	[WY]	[PR]

Business or Residence Address (Number and Street, City, State, Zip Code)

308 Ironstone Lane, Elverson, PA 19520-9067

Name of Associated Broker or Dealer

Sanders Morris Harris, Inc.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) [

[CO] [CT] [AZ] [AR] [CA] [DE] [DC] [FL] [GA] [HI] [ID] [AL] [AK] (HLL [N][IA] [LA] [ME] [KS] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NJ] [NM] [NH] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN][TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Johnston, Roy

Business or Residence Address (Number and Street, City, State, Zip Code)

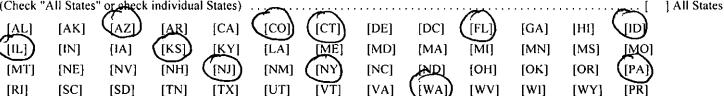
667 Exton Commons, Exton, PA 19341

Name of Associated Broker or Dealer

Sanders Morris Harris, Inc.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or eheck individual States)



Full Name (Last name first, if individual)

Kim, John V.

Business or Residence Address (Number and Street, City, State, Zip Code)

300 Courtyard Sq. 80 S. Summit St., Akron, OH 44308

Name of Associated Broker or Dealer

M Holdings Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) [] All States

[GA] [HI] [ID] [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [EL] [N][AI][KY] [ME] [MI] [MN] [MO] [IL][KS] [LA] [MD] [MA] [MS] [NV] [NH] [ND] [OK] [OR] [PA] [MT] [NE] [NJ] [NM] [NY] [NC] [OH] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Tomasi, Christine

Business or Residence Address (Number and Street, City, State, Zip Code)

555 E. Ocean Blvd., Suite 205, Long Beach, CA 90802

Name of Associated Broker or Dealer

Commonwealth Financial Network

(Check "All States" or check individual States)

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

AL [AK] [AZ][AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [KY] IN []A][KS] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [NH] [NC] [MT] [NV] [NJ] [NM] [NY] [ND] [OH] [OK] [OR] [PA] [NE] [RI][SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

] All States

Werry, Dan

Business or Residence Address (Number and Street, City, State, Zip Code) 310 Fourth Avenue, Suite 1100, Minneapolis, MN 55415

Name of Associated Broker or Dealer

OMNI Brokerage

(Check "A	All States" or	check indiv	idual States) . <u></u>		[] All States					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	(MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already so Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	ld.			
Type of Security	of	ggregate lefing Price	Am	ount Already Sold
Debt	. <u>\$</u>	-0-	\$	-0-
Equity	<u>\$</u>	-0-	<u>\$</u>	-0-
[] Common [] Preferred				
Convertible Securities (including warrants)	<u>\$</u>	-0-	\$	-0-
Partnership Interests	<u>\$ 6</u>	,682,432	<u>\$ 6</u>	682,432
Other (Specify)	<u>\$</u> _	-0-	<u>\$</u>	-0-
Total	<u>\$ 6</u>	,682,432	<u>\$ 6</u>	682,432
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	ne			
		mber of restors	Dō An	gregate flar count urchases
Accredited Investors	· ·	83	<u>\$ 5</u>	952,432
Non-accredited Investors		14	<u>\$</u>	730,000
Total (for filings under Rule 504 only)	··-	N/A	<u>\$</u>	N/A
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale securities in this offering. Classify securities by type listed in Part C-Question 1.	of			
Type of offering	Ty Se	pe of curity		llar lount d
Rule 505		N/A	<u>\$</u> _	N/A
Regulation A		N/A	<u>\$</u>	N/A
Rule 504		N/A	<u>\$</u>	N/A
Total		N/A	<u>\$</u>	N/A

be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	
Transfer Agent's Fees	[]\$
Printing and Engraving Costs	[]\$
Legal Fees	[X] \$ <u>65,000</u>
Accounting Fees	[]\$
Engineering Fees	[]\$
Sales Commissions (specify finders' fees separately)	
Other Expenses (identify) Due Diligence Expenses, Marketing Expenses, Organizational and Offering Expenses, Wholesale Fees	[X] \$ <u>302,533</u>
Total	[]\$ <u>836,709</u>
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	[] \$ 5,845,723
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in respons Part C - Question 4.b above.	the e to
	Payments to Payments Officers, To Others Directors, & Affiliates
Salaries and fees []\$	[]\$
Purchase of real estate	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$ []\$
Working capital [] \$	[]\$
Other (specify): (Investments in entities holding real estate interests)	1,458,399 [X] \$4,387,324
Column Totals [X] \$	1,458,399 [X]\$4,387,32
Total Payments Listed (column totals added)	[X] \$ <u>5,845,723</u>

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature / /////	Date					
Rainier Income & Growth Fund II, Ltd.	//////	October 16, 2006					
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
J. Kenneth Dunn	President of Rainier Income & Growth Fund I Issuer	I GP, LLC, General Partner of					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Rainier Income & Growth Fund II, Ltd.		October 16, 2006
Name of Signer (Print or Type)	Title (Print or Type)	
J. Kenneth Dunn	President of Rainier Income & Growth Fun Issuer	d II GP, LLC, General Partner of

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				ΑĬ	PPENDIX				
1		2	3			4			5
	to non-a investor	I to self ceredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type o amount pi (Pari		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
Al,									
AK									
AZ.		X	Limited Partnership Interests (\$200,000)	3	\$ 200,000	-0-	\$ -0-		X
AR									
СЛ	x		Limited Partnership Interests (\$585,164)	8	\$ 455,164	2	\$ 130,000		х
со		х	Limited Partnership Interests (\$185,000)	3	\$ 185,000	-0-	\$ -0-		X
СТ		X	Limited Partnership Interests (\$150,000)	3	\$ 150,000	-0-	\$ -0-		х
DE	_	ļ							
DC			T						
FL		X	Limited Partnership Interests (\$765,000)	6	\$ 765,000	-0-	S -0-		Х
GA	x	:	Limited Partnership Interests (\$580,000)	8	\$ 490,000	3	\$ 90,000		х
HI	х		Limited Partnership Interests (\$550,000)	. 3	\$ 450,000	1	\$ 100,000		х
ID	Х		Limited Partnership Interests (\$25,000)	-0-	\$ -0-	1	\$ 25,000		x
11.		x	Limited Partnership Interests (\$250,000)	4	\$ 250,000	-0-	\$ -0-		х
IN .		X	Limited Partnership Interests (\$50,000)	1	\$50,000	-0-	\$ -0-		Х
1/									
KS		x	Limited Partnership Interests (\$25,000)	1	\$ 25,000	-0-	\$ -0-		х
KY			Limited Partnership						
LA		X	Limited Partnership Interests (\$100,000)	2	\$ 100,000	-0-	\$ -0-		Х
МЕ		<u> </u>							
мю		X	Limited Partnership Interests (310,000)	3	\$310,000	-0-	\$ -0-		X
МА		x	Limited Partnership Interests (\$175,000)	4	\$ 175,000	-0-	\$ -0-		х
MI	X		Limited Partnership Interests (\$90,000)	-0-	\$ -0-	1	\$ 90,000		х
MN		X	Limited Partnership Interests (50,818)	1	\$ 50,818	-()-	\$ -0-		Х
MS								L	

:	to non-a	to sell ceredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type o amount pi (Part		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МТ		_							
NE									
NV									
NH									
NJ		Х	Limited Partnership Interests (\$100,000)	2	\$ 100,000	-0-	\$ -0-		х
NM		х	Limited Partnership Interests (\$75,000)	1	\$ 75,000	-0-	\$-0-		х
NY	х		Limited Partnership Interests (\$405,000)	5	\$ 380,000	1	\$ 25,000		Х
NC	X		Limited Partnership Interests (\$310,000)	3	\$ 290,000	1	\$ 20,000		X
ND									
ОН	x		Limited Partnership Interests (\$345,000)	4	\$195,000	1	\$ 150,000		Х
ОК									
OR		x	Limited Partnership Interests (\$100,000)	L	\$ 100,000	-0-	\$ -0-		X
PΛ	х		Limited Partnership Interests (\$430,000)	6	\$400,000	1	\$ 30,000		Х
RI									
SC		х	Limited Partnership Interests (\$100,000)	1	\$ 100,000	-0-	\$ -0-		X
\$D									
TN									
TX		x	Limited Partnership Interests (\$175,000)	3	\$ 175,000	-0-	\$ -0-		X
UT	x		Limited Partnership Interests (\$250,000)	3	\$ 180,000	2	\$ 70,000		X
VT	,	X	Limited Partnership Interests (\$40,000)	1	\$ 40,000	-0-	\$ -0-		X
VA		X	Limited Partnership Interests (\$50,000)	1	\$50,000	-0-	\$-0-		X
WA		X	Limited Partnership Interests (\$151,450)	1	\$ 151,450	-0-	\$ -0-		Х
wv		X	Limited Partnership Interests (\$60,000)	1	\$ 60,000	-0-	\$ -0-		х
WI									<u> </u>
WY									
PR			<u> </u>		Page 8 of 8				·